

NOV 2 8 2016



FIEND R21404303

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

APPLICATION FOR REGISTRATION OF FOREIGN LIMITED LIABILITY COMPANY

Please read Instructions L025i

1.	ENTITY TYPE - check only one to indicate the type of entity applying for registration:							
		LIMIT	ED LIABILITY COMPANY	PROFESSIONAL LIMITED LIABILITY COMPANY				
2.	NAME IN STATE OR COUNTRY OF FORMATION (FOREIGN NAME) – enter the exact, true name of the foreign LLC:							
	MHC	Mon	tecito, LLC					
3.	NAME TO BE USED IN ARIZONA (ENTITY NAME) – identify the name the foreign LLC will use in Arizona by checking 3.1 or 3.2 (check only one), and follow instructions:							
	3.1 Name in state or country of form number 4 and continue.				untry of formation, with no changes or additions – go to e.			
	3.2	Fictitious name – check this if the foreign LLC's name in its state or country formation is not available for use in Arizona or if that name does not contain identifier, and enter the name in number 3.3 below. NOTE – a resolution of company adopting the fictitious name must be attached to and submitted wit form.						
	3.3	If you checked 3.2, enter or print the name to be used in Arizona:						
4. PROFESSIONAL LIMITED LIABILITY COMPANY SERVICES – if professional LLC in number 1 above, describe the professional services that the professional LLC will (examples: law firm, accounting, medical):								
5.	FOREIGN DOMICILE - list the state or country in which the foreign LLC was formed: California							
6.	DATE OF FORMATION IN FOREIGN DOMICILE: November 3, 2016							
7.	PURPOSE OR GENERAL CHARACTER OF BUSINESS – describe or state the purpose of the foreign LLC or the general character of the business it proposes to transact in Arizona: Real Estate Holdings							

8.	STAT	UTORY AG	ENT IN AR	IZONA:					
	8.1	an individual or street ad	REQUIRED – give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			8.2 OPTIONAL - Mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):			
Nati	ional	Registere	d Agents,	Inc.		···		***************************************	
Statuto	ory Agent	Name (required)							
	en (option	anelback R	oad		Attention (optional)			
Addres				· · · · · · · · · · · · · · · · · · ·	Address 1				
	s 2 (option Phoe		AZ State	85016 zip	Address 2	(optional)	State	Zip	
City	8.3	REQUIRED		itory Agent Acce		rm M002 must			
9.	L025	- give the	physical or	ESS - FOREIGN r street address	s (not a F	P. O. Box) of th	ne foreign Ll	LC required to be	
			state of org try of organi	janization, or, if r zation:	not so re	quired, of the f	foreign LLC's	s statutory agent	
		Attention (op	tional)		·				
		2688 M Address 1	IIDDLEFIE	LD RD UNIT C	·				
	Address 2 (optional) REDWOOD CITY		•		CA		9	94063	
		City Country	UNITED STA	ATES		State or Province	Z)	p	
10.	OPTI 10.1	Is the A	rizona know	OWN PLACE OF n place of busine nt?	ess street	address the sa	ame as the	street address	
			atato, y ago.		=	number 10.2		2.	
10.2 If you answered "no" to number Box) of the known place of busing					10.1, give the physical or street address (not a P.O. ess of the LLC in Arizona:				
		Attention (op	itional)		, , , , , , , , , , , , , , , , , , ,				
		Address 1							
		Address 2 (o	ptional)				Ţ	·	
		City				State or Province	L	iρ	
		Country	·						

COMPLETE NUMBER 11 OR NUMBER 12 - NOT BOTH.

11.	MANAGER-MANAGED LLC – <u>see Instructions L025i</u> – check this box					
12.	MEMBER-MANAGED LLC – <u>see Instructions L025i</u> – check this box ☐ if management of the LLC is reserved to the members, and complete and attach the <u>Member Structure Attachment</u> form L041. The filing will be rejected if it is submitted without the attachment.					
13.	SIGNATURE: By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance with Arizona law.					
	✓ I ACCEPT					
	W-6-864		David G. Estes	11/22/16		
REQUIRED - check only one and fill in the corresponding blank if signing for an entity:						
_	I am the individual Mana, manager-managed LLC o signing for an entity man named:	rIam	I am a Member of this member- managed LLC or I am signing for an entity member named :	I am a duly authorized agent for this LLC.		

Filing Fee: \$150.00 (regular processing) Mail: Arizona Corporation Commission - Corporate Filings Section Expedited processing - add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007 All fees are nonrefundable - see Instructions. Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.





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MANAGER STRUCTURE ATTACHMENT

- ENTITY NAME give the exact name of the LLC (foreign LLCs give name in domicile state or country):
 MHC Montecito, LLC

 A.C.C. FILE NUMBER (If known):
 Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations
- 3. MANAGERS / MEMBERS give the name and address of each and every manager and list all members who own 20% or more of the profits or capital of the LLC. Use one block per person. Members who own less than 20% may also be listed, but it is not required. Check the appropriate box or boxes below each person listed do not check both member boxes. If more space is needed, use another Manager Structure Attachment form.

MHC Montecito HoldCo, LLC	2.
2688 MIDDLEFIELD RD UNIT C	Name
Address 1	Address 1
Address 2 (optional) REDWOOD CITY CA 94063	Address 2 (optional)
UNITED STATES State or Zip Province	City State or Zip Province .
Country 20% or more member Manager Less than 20% member	Country 20% or more member Manager Less than 20% member
3.	4.
Name	Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City State or Zip Province	City State or Zip Province
Country 20% or more member	Country 20% or more member
Manager Less than 20% member 5.	Less than 20% member 6.
Name	Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City State or Zip Province	City State or Zip Province
Country 20% or more member	Country 20% or more member
Manager Less than 20% member	Manager Less than 20% member

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STATUTORY AGENT ACCEPTANCE

Please read Instructions M0021

1.	ENTITY NAME – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation): MHC Montecito, LLC				
2.	STATUTORY AGENT NAME — give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be <i>either</i> an Individual or an entity). <i>NOTE</i> - the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:				
	National Registered Agents, Inc.				
3.	STATUTORY AGENT SIGNATURE:				
	By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.				

The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Karen Fugelsang

Frinted Name

Date

REQUIRED - check only one:

Individual as statutory agent: I am signing on signing on behalf of myself as the individual (natural person) named as statutory agent.

Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.

Filing Fee: none (regular processing)
Expedited processing – not applicable.
All fees are nonrefundable – see Instructions.

Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007

Fax: 602-542-4100

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Mail:

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State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: MHC MONTECITO, LLC

FILE NUMBER: FORMATION DATE:

201632310018 11/03/2016

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 22, 2016.

ALEX PADILLA Secretary of State